

01/21/00  
Jc644 U.S. PTO

PATENT  
Attorney Docket No.: DEXCOM-04114  
SAH  
#4A  
7-10-00

IN THE UNITED STATES PATENT AND TRADEMARK OFFICE

Box Patent Application  
Assistant Commissioner For Patents  
Washington, D.C. 20231

NEW APPLICATION TRANSMITTAL

Transmitted herewith for filing is the patent application of Mark C. Shults, Stuart J. Updike and Rathbun K. Rhodes for **Device and Method For Determining Analyte Levels**.

CERTIFICATION UNDER 37 C.F.R. § 1.10

I hereby certify that this New Application Transmittal and the documents referred to as enclosed therein are being deposited with the U.S. Postal Service on this date **January 21, 2000** in an envelope as "Express Mail Post Office to Addressee" Mailing Label Number **EL512052220US** addressed to: **Box Patent Application**, Assistant Commissioner For Patents, Washington, D.C. 20231.

*Traci E. Light*  
Traci E. Light

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09/489588  
01/21/00

1. **Type Of Application**  
This new application is for a(n)  
☒ Original (nonprovisional)  
☒ Continuation.
2. **Benefit Of Prior U.S. Application(s)** (35 U.S.C. §§ 119(e), 120, or 121)  
☒ The new application being transmitted claims the benefit of prior U.S. application(s) and enclosed are **ADDED PAGES FOR NEW APPLICATION TRANSMITTAL WHERE BENEFIT OF PRIOR U.S. APPLICATION(S) CLAIMED**.
3. **Papers Enclosed That Are Required For Filing Date Under 37 C.F.R. § 1.53(b) (Regular) or 37 C.F.R. § 1.153 (Design) Application**  
39 Pages of Specification  
3 Pages of Claims  
1 Page of Abstract  
9 Sheets of Informal Drawings
4. **Declaration**  
☒ Enclosed  
☒ Unexecuted.
5. **Inventorship Statement**  
The inventorship for all the claims in this application is:  
☒ the same
6. **Language**  
☒ English
7. **Assignment**  
☒ An assignment of the invention to **Markwell Medical Institute** is attached.  
☒ Form PTO-1595 will follow.
8. **Fee Calculation (37 C.F.R. § 1.16)**  
☒ Regular application

CLAIMS AS FILED

Number Filed	Number Extra	Rate	Basic Fee - \$690.00 (37 C.F.R. § 1.16(a))
Total Claims (37 C.F.R. § 1.16(c))	15 - 20 =	0 × \$18.00 =	\$0.00
Independent Claims (37 C.F.R. § 1.16(b))	1 - 3 =	0 × \$78.00 =	\$0.00
Multiple Dependent Claim(s), if any (37 C.F.R. § 1.16(d))	+ \$260.00 =		\$0.00
Filing Fee Calculation			\$690.00

*a*

9. **Small Entity Statement(s)**

- ☒ Verified Statement(s) that this is a filing by a small entity under 37 C.F.R. §§ 1.9 and 1.27 is(are) attached.

Filing Fee Calculation (50% of above) \$345.00

10. **Fee Payment Being Made At This Time**

- ☒ Enclosed  
☒ basic filing fee

\$345.00

Total Fees Enclosed \$345.00

11. **Method of Payment of Fees**

- ☒ Check in the amount of \$345.00

12. **Authorization To Charge Additional Fees and Credit Overpayment**

- ☒ The Commissioner is hereby authorized to charge payment of any fees associated with this communication or credit any overpayment to Deposit Account No.: 08-1290. An originally executed duplicate of this transmittal is enclosed for this purpose.

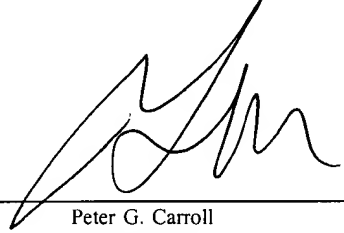
13. **Power of Attorney by Assignee**

- ☒ Enclosed

14. **Return Receipt Postcard**

- ☒ Enclosed

Dated: January 21, 2000

  
Peter G. Carroll  
Registration No.: 32,837

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☒ **Incorporation By Reference Of Added Pages**

- ☒ Plus Added Pages For New Application Transmittal Where Benefit Of Prior U.S. Application(s) Claimed

Number of pages added 1

